

AMENDED IN SENATE JUNE 16, 2010

AMENDED IN SENATE JUNE 24, 2009

AMENDED IN ASSEMBLY JUNE 2, 2009

AMENDED IN ASSEMBLY APRIL 1, 2009

AMENDED IN ASSEMBLY MARCH 5, 2009

CALIFORNIA LEGISLATURE—2009—10 REGULAR SESSION

ASSEMBLY BILL

No. 52

Introduced by Assembly Member Portantino

(Principal coauthor: Assembly Member Anderson)

(Coauthors: Assembly Members Bass, Block, Blumenfield, Buchanan, Cook, Huffman, Jones, Ma, Salas, Swanson, and Torlakson)

(Principal coauthor: Senator Alquist)

(Coauthors: Senators DeSaulnier, Leno, Maldonado, Padilla, and Price)

December 2, 2008

An act to amend Sections 1627, 1628, and 1630 of, *and* to amend, repeal, and add Sections 102247, 103605, and 103625 of, ~~and to add Sections 1627.5 and 1627.7 to~~, the Health and Safety Code, relating to umbilical cord blood banking, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

AB 52, as amended, Portantino. Umbilical Cord Blood Collection Program.

Existing law requires the State Department of Public Health to establish, by January 1, 2010, and until January 1, 2015, the Umbilical

Cord Blood Collection Program for the purpose of increasing the amount of umbilical cord blood that is donated in the state and that will be added to the national inventory. Existing law authorizes the department, to the extent private or public funds are identified for this purpose, to contract with blood banks that are licensed or accredited to provide umbilical cord blood banking storage services, for the purpose of collecting and storing umbilical cord blood.

This bill would, instead, ~~require the department~~ *to the extent adequate federal funding, as determined by the University of California (UC), is appropriated to UC, request UC to establish and administer the Umbilical Cord Blood Collection Program from January 1, 2011, until January 1, 2020, for the purpose of collecting—and storing units of* umbilical cord blood for public use, as defined, for transplantation and for providing nonclinical units for specified research.

~~This bill would require the department to establish the California Umbilical Cord Blood Collection Board, with prescribed membership, which would administer the program in accordance with specified requirements.~~

Existing law provides that any funds made available for purposes of the program shall be deposited into the Umbilical Cord Blood Collection Program Fund. Existing law provides that moneys in the fund shall be available, upon appropriation by the Legislature, for purposes of the program. Existing law provides that the fund shall include any federal, state, and private funds made available for purposes of the program.

Existing law requires the collection of a \$7 fee for certified copies of birth certificates.

Under existing law, \$4 of the \$7 fee is allocated to either the county Children's Trust Fund or to the State Children's Trust Fund, which exists in the State Treasury. Existing law requires that the money in the State Children's Trust Fund, upon appropriation by the Legislature, be allocated to the State Department of Social Services for the purpose of funding child abuse and neglect prevention and intervention programs, as specified.

This bill would, instead, until January 1, 2020, require the collection of a \$9 fee for certified copies of birth certificates and require that \$2 of any \$9 fee be paid to the Umbilical Cord Blood Collection Program Fund.

The bill would provide that no moneys shall be expended from the fund to implement the program unless *and until UC accepts the request to establish and administer the program and* the Controller determines,

by an unspecified date, that at least an unspecified amount is available in the fund, and would provide, if this determination is not made, for a prescribed distribution of the money in the ~~fund, including the distribution of proceeds from the birth certificate fee increase to the Children's Trust Fund.~~ *fund.*

This bill would declare that it is to take effect immediately as an urgency statute.

Vote: $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes.

State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the
2 following:

3 (a) Although rich in stem cells known as hematopoietic stem
4 and progenitor cells (HSPCs), the blood within the umbilical cord
5 and placenta is mostly discarded as medical waste following the
6 birth of a child. The relatively small number of units of cord blood
7 that are stored for transplantation are used to treat blood cancers,
8 such as leukemia, myeloma, and lymphoma, and more than 70
9 inherited immunodeficiencies and other genetic and acquired blood
10 diseases, including sickle cell anemia, thalassemias,
11 hemoglobinopathies, aplastic anemias, and marrow failure
12 disorders, and inherited disorders or errors of metabolism.

13 (b) Conducted after birth, the cord blood donation procedure is
14 quick, painless, and ~~risk-free~~ *risk free* to the child and mother. The
15 harvested cord blood is immediately shipped, processed, sorted,
16 labeled, stored, and frozen. Since the first transplant in 1988, as
17 its use for transplantation has steadily increased, the unique
18 handling of cord blood has been the subject of both recent and
19 pending regulation by the United States Food and Drug
20 Administration (FDA).

21 (c) Although only one-third of all harvested cord blood has
22 sufficient stem cells to be suitable for transplantation as currently
23 practiced, the rest may be valuable to university-based and private
24 research facilities that continue to search for cures for some of our
25 most common and perplexing medical conditions. The uses for
26 cord blood are quickly evolving and have created great excitement
27 among researchers and physicians. For example, cord blood derived
28 from stem and progenitor cells may also be particularly suitable

1 candidates for conversion into induced pluripotent stem cells
2 (IPSCs) derived by modifying only four stem cell-associated genes.
3 This modification causes the cord blood stem cells to exhibit the
4 essential characteristics of embryonic stem (ES) cells, the potential
5 to differentiate into all tissues of the body. Since cord blood stem
6 and progenitor cells per se are very early cells that have great
7 proliferative capacity, and they already are banked for public use,
8 tested, and HLA-typed, they could well become the premier source
9 of optimal cells to convert to IPSCs and might, arguably, provide
10 an individual a lifetime of personalized replaceable tissue.

11 (d) Cord blood units that are appropriate for transplantation are
12 used to treat more than 70 lethal diseases, but the current inventory
13 is not only unable to accommodate the overall demand, but
14 especially fails to properly provide matched units for many ethnic
15 and racial groups, including multicultural individuals. According
16 to the United States Government Accountability Office (GAO)
17 and the National Marrow Donor Program, over 10,000 children
18 and adults in the United States would benefit annually from a
19 transplant from someone unrelated to them, but less than 30 percent
20 actually receive one largely due to an inadequate inventory.

21 (e) Unlike bone marrow, cord blood can provide good clinical
22 outcomes with less than a perfect match to the patient. However,
23 to transplanting physicians, both options are considered valuable.
24 A bone marrow donation requires an exact match and a live donor
25 who is willing and available to undergo a time-sensitive medical
26 procedure. With targeted collections and an adequate inventory,
27 cord blood can be stored frozen and made immediately available
28 upon need. This source of stem cells provides all races, ethnicities,
29 and multiracial individuals with an equal probability of a suitable
30 match.

31 (f) Private industry has focused on alerting the public about the
32 possibility of banking cord blood for their families. However, the
33 goal of the California Umbilical Cord Blood Collection Program
34 ~~is to collect cord blood only for public use to ensure all persons~~
35 ~~have an equal probability of attaining an appropriate stem cell~~
36 ~~match.~~ *is to develop a public cord blood collection program with*
37 *the goal of promoting donor diversity so as to increase the chance*
38 *that a suitable match can be found for all Californians in need of*
39 *a transplant.*

1 (g) The federal government established the ~~Stem Cell~~
2 ~~Therapeutic and Research Act of 2005~~ *C.W. Bill Young Cell*
3 ~~Transplantation Program~~ (42 U.S.C. Sec. ~~201 et seq.~~) 274k) to
4 collect and maintain cord blood for public use in transplantation
5 and research. The goal of the federal program is to collect 150,000
6 genetically diverse units in an effort to provide patients of all
7 ethnicities an equal probability of receiving a clinical grade,
8 suitably matched unit of umbilical cord blood. The program,
9 implemented by *the* Health Resources and Services Administration
10 (HRSA) which is part of the United States Department of Health
11 and Human Services, has specified target collection goals for cord
12 blood units that will match patient populations that are
13 underrepresented in the national inventory, including Native
14 American, Latino, African American, Asian, and multiracial
15 individuals.

16 (h) California has been a leader in stem cell research through a
17 number of previous and ongoing efforts. For example, California
18 pioneered the first sibling donor cord blood pilot project, and is a
19 world leader in the more general area of stem cell research and its
20 medical applications through the establishment and funding of the
21 California Institute of Regenerative Medicine (CIRM). This makes
22 California ideally situated to become the leader in harnessing the
23 therapeutic potential of nonhematopoietic cord blood-derived stem
24 and progenitor cells.

25 (i) Furthermore, California is home to the most ethnically diverse
26 population in the world with the highest birth rate in the nation of
27 550,000 per year. Cord blood donations from California will not
28 only serve the health needs of Californians, but help build a more
29 diverse inventory that can provide better matches for patients
30 throughout the world.

31 (j) In addition to directly savings lives, an increase in the
32 inventory of FDA-licensed cord blood stem cell units will save
33 the state, insurers, donors, and patients significant money now
34 being spent on lifetime treatments and relieve ongoing pain and
35 anguish of affected patients and their families.

36 ~~(k) Although the Umbilical Cord Blood Collection Program~~
37 ~~and the California Umbilical Cord Blood Collection Board will~~
38 ~~be within the State Department of Public Health, it is the intent of~~
39 ~~the Legislature that they operate autonomously and be~~
40 ~~self-contained.~~

SEC. 2. Section 1627 of the Health and Safety Code is amended to read:

1627. (a) (1) On or before January 1, 2011, the ~~State Department of Public Health shall establish~~ *University of California is requested to develop a plan to establish and administer* the Umbilical Cord Blood Collection Program for the purpose of collecting ~~and storing~~ *units of* umbilical cord blood for public use in transplantation and providing nonclinical units for research pertaining to biology and new clinical utilization of stem cells derived from the blood and tissue of the placenta and umbilical cord. The program shall conclude no later than December 31, 2019.

(2) For purposes of this article, “public use” means both of the following:

(A) The collection of umbilical cord blood units from genetically diverse donors that will be owned by the ~~participating cord blood bank that is chosen by the California Umbilical Cord Blood Collection Board, established pursuant to Section 1627.5, to process and store the cord blood units. This inventory shall be~~ *University of California. This inventory shall be* accessible by the National Registry and by *qualified* California-based and other United States and international registries and transplant centers to increase the likelihood of providing suitably matched donor tissue to patients who are in need of transplantation.

(B) Cord blood units with a lower number of cells than deemed necessary for clinical transplantation, ~~and those available in excessive numbers owing to their overly common types, and those that are otherwise inappropriate for clinical use,~~ as well as placental tissue, shall be provided to assist California-based academic stem cell research laboratories in the investigation of treatments for ~~additional human diseases~~ *human disease*, under protocols approved by the Committee for the Protection of Human Subjects or an institutional review board, as defined in subdivision (e) of Section 125330, ~~or by the State Department of Public Health.~~

(b) (1) In order to implement the collection part of this program, the ~~board shall~~ *University of California may, commensurate with available funds appropriated to the University of California for this program,* contract with one or more selected applicant entities that have demonstrated the competence to collect and ship cord blood units in compliance with federal Food and Drug Administration (FDA) and Health Resources and Services

Administration (HRSA) guidelines and regulations. ~~The collected units shall only be shipped to a cord blood bank that has obtained an FDA investigational new drug (IND) exemption, a valid accreditation from an agency recognized by the State Department of Public Health, and shall be approved by its own institutional review board (IRB) and the IRB of the hospitals where the cord blood would be collected, or has a Biologic License from the FDA, when available, to manufacture clinical grade cord blood stem cell units for clinical indications and to make nonclinical level cord blood units available to entities that will perform medical research for purposes consistent with public use, as defined in paragraph (2) of subdivision (a). The board shall ensure that cord blood units financed by the program are manufactured in full compliance with FDA and HRSA regulations so that all umbilical cord blood units stored are of the highest quality and can be utilized by the National Registry, as administered by HRSA. A medical provider or research facility shall comply with, and shall be subject to existing penalties for violations of, all state and federal laws with respect to the protection of any medical information, as defined in subdivision (g) of Section 56.05 of the Civil Code, and any personally identifiable information contained in the umbilical cord blood inventory.~~

~~(2) In selecting qualified entities under this subdivision, the~~

(2) It is the intent of the Legislature that, if the University of California contracts with another entity pursuant to this subdivision, the following shall apply:

(A) The board University of California may use a competitive process to identify the best proposals submitted by applicant entities to administer the collection, banking, and research objectives of the program, to the extent that the University of California chooses not to undertake these activities itself.

~~(B) In order to qualify for selection under this section to bank cord blood, an entity shall have obtained an FDA IND, a valid~~

(B) In order to qualify for selection under this section to receive, process, and bank cord blood units, the entity shall, at a minimum, have obtained an investigational new drug (IND) exemption from the FDA, a valid accreditation from an agency recognized by the State Department of Public Health, and shall be approved by its own IRB and those of the hospitals where the cord blood would be collected, or a an IRB, or a Biologic License from the FDA,

1 when available, to manufacture clinical grade cord blood stem cell
2 units for clinical indications.

3 (C) In order to qualify to receive appropriate cord blood units
4 and placental tissue to advance the research goals of this program,
5 an entity shall, *at a minimum*, be a laboratory recognized as having
6 performed peer-reviewed research on stem and progenitor cells,
7 including those derived from placental or umbilical cord blood
8 and postnatal tissue.

9 ~~(e) The board shall ensure that the program attempts to meet,~~
10 ~~at a minimum, all of the following objectives:~~

11 ~~(1) Define and identify qualified umbilical cord blood collection~~
12 ~~entities in accordance with subparagraph (B) of paragraph (2) of~~
13 ~~subdivision (b):~~

14 ~~(2) Design a competitive process for identifying qualified~~
15 ~~participants in accordance with subparagraph (B) of paragraph (2)~~
16 ~~of subdivision (b) in a manner that complies with state, federal,~~
17 ~~and international regulations:~~

18 ~~(3) Establish criteria for determining when units of umbilical~~
19 ~~cord blood may be used only for research and when units of~~
20 ~~umbilical cord blood may be used only for transplantation and a~~
21 ~~policy addressing circumstances under which units of umbilical~~
22 ~~cord blood may be used for either purpose:~~

23 ~~(4) Create umbilical cord blood collection targets for ethnically~~
24 ~~diverse populations in accordance with identified deficiencies in~~
25 ~~the inventories in order to provide all Californians an equal~~
26 ~~probability of obtaining a suitable match:~~

27 ~~(5) Develop a strategy to increase voluntary participation by~~
28 ~~hospitals in the collection and storage of umbilical cord blood and~~
29 ~~identify funding sources to offset the financial impact on hospitals:~~

30 ~~(6) Consider a medical contingency response program to prepare~~
31 ~~for and respond effectively to biological, chemical, or radiological~~
32 ~~attacks, accidents, and other public health emergencies where~~
33 ~~victims potentially benefit from treatment:~~

34 ~~(7) Determine whether collection of umbilical cord blood from~~
35 ~~donors that have siblings or other close relatives who either have~~
36 ~~or are at high risk of developing a disease that can be treated by~~
37 ~~stem cell transplantation would help achieve the overall inventory~~
38 ~~goals of the program:~~

1 ~~(8) Explore the feasibility of operating the program as a~~
2 ~~self-funding program, including the potential of charging users a~~
3 ~~reimbursement fee.~~

4 ~~(9) Ensure the program does not conflict with other national~~
5 ~~and international efforts to generate an adequate inventory of~~
6 ~~high-quality umbilical cord blood.~~

7 *(3) A medical provider or research facility shall comply with,*
8 *and shall be subject to, existing penalties for violations of all*
9 *applicable state and federal laws with respect to the protection of*
10 *any medical information, as defined in subdivision (g) of Section*
11 *56.05 of the Civil Code, and any personally identifiable information*
12 *contained in the umbilical cord blood inventory.*

13 ~~(d)~~
14 *(c) In implementing the program, the board shall University of*
15 *California is encouraged to make every effort to avoid duplication*
16 *or conflicts with existing and ongoing programs and to leverage*
17 *existing resources. The board shall use its existing authority to*
18 *promote the collection, storage, retrieval, and distribution of*
19 *umbilical cord blood and advise the Legislature of its needs to*
20 *accomplish these goals.*

21 ~~(e)~~
22 *(d) (1) All information collected pursuant to the program shall*
23 *be confidential, and shall be used solely for the purposes of the*
24 *program, including research. Access to confidential information*
25 *shall be limited to authorized persons who are bound by*
26 *appropriate institutional policies or who otherwise agree, in*
27 *writing, to maintain the confidentiality of that information.*

28 *(2) Any person who, in violation of applicable institutional*
29 *policies or a written agreement to maintain confidentiality,*
30 *discloses any information provided pursuant to this section, or*
31 *who uses information provided pursuant to this section in a manner*
32 *other than as approved pursuant to this section, may be denied*
33 *further access to any confidential information maintained by the*
34 *department University of California, and shall be subject to a civil*
35 *penalty not exceeding one thousand dollars (\$1,000). The penalty*
36 *provided for in this section shall not be construed to limit or*
37 *otherwise restrict any remedy, provisional or otherwise, provided*
38 *by law for the benefit of the department University of California*
39 *or any other person covered by this section.*

(3) Notwithstanding the restrictions of this section, an individual to whom the confidential information pertains shall have access to his or her own personal information.

SEC. 3. ~~Section 1627.5 is added to the Health and Safety Code, to read:~~

~~1627.5. (a) (1) There shall be established, within the State Department of Public Health, the California Umbilical Cord Blood Collection Board for purposes of implementing the Umbilical Cord Blood Collection Program established pursuant to Section 1627.~~

~~(2) The board shall be the decisionmaking body for the program and shall develop policies for implementing the program that are in accordance with the objectives specified in subdivision (c) of Section 1627.~~

~~(b) (1) The board shall be composed of five members who shall be appointed not later than March 1, 2011. The Governor shall appoint one member who shall chair the board, and the Senate Committee on Rules and the Speaker of the Assembly shall each appoint two members.~~

~~(2) The board shall include all of the following:~~

~~(A) A medical director or chief scientist of an umbilical cord blood bank that meets all of the following requirements:~~

~~(i) Is not based in California.~~

~~(ii) Has obtained a federal Food and Drug Administration investigational new drug (FDA IND).~~

~~(iii) Has a valid accreditation from an agency recognized by the State Department of Public Health.~~

~~(iv) Has been approved by its own institutional review board (IRB) and the IRBs of hospitals where the umbilical cord blood would be collected, or has a biological license from the FDA to manufacture, store, and release clinical-grade units of cord blood stem cells.~~

~~(B) A transplant physician with experience in transplanting units of umbilical cord blood.~~

~~(C) A physician with expertise in obstetrics or gynecology and experience in a birthing hospital participating in umbilical cord blood collections.~~

~~(D) A scientist with expertise in the biology of stem and progenitor cells derived from placental and umbilical cord blood and tissue.~~

1 ~~(E) A person with professional business knowledge of and~~
2 ~~experience in umbilical cord blood banking, as practiced~~
3 ~~internationally.~~

4 ~~(e) Board members shall serve without compensation, except~~
5 ~~that members shall be reimbursed for authorized travel costs and~~
6 ~~expenses.~~

7 ~~(d) The following persons may be appointed to assist the board~~
8 ~~with the administration of the program:~~

9 ~~(1) An officer who is appointed by the board and is exempt from~~
10 ~~civil service pursuant to subdivision (e) of Section 4 of Article VII~~
11 ~~of the California Constitution.~~

12 ~~(2) An officer who is appointed by the Governor and is exempt~~
13 ~~from civil service pursuant to subdivision (f) of Section 4 of Article~~
14 ~~VII of the California Constitution.~~

15 ~~SEC. 4. Section 1627.7 is added to the Health and Safety Code,~~
16 ~~to read:~~

17 ~~1627.7. (a) The California Umbilical Cord Blood Collection~~
18 ~~Board shall submit two reports to the Assembly and Senate~~
19 ~~Committees on Health, the Assembly and Senate Committees on~~
20 ~~Judiciary, and the Governor on the effectiveness of the program.~~
21 ~~The first report shall be submitted no later than January 1, 2013,~~
22 ~~and the second report no later than January 1, 2018.~~

23 ~~(b) The chair of the board shall submit an annual report to the~~
24 ~~Assembly and Senate Committees on Health, the Assembly and~~
25 ~~Senate Committees on Judiciary, and the Governor, on the progress~~
26 ~~of the program in meeting its goals. The chair shall continue to~~
27 ~~provide the annual report until the Governor determines that the~~
28 ~~reports are no longer necessary, and files a declaration to that effect~~
29 ~~with the department.~~

30 ~~SEC. 5.~~

31 ~~SEC. 3. Section 1628 of the Health and Safety Code is amended~~
32 ~~to read:~~

33 ~~1628. (a) The California Umbilical Cord Blood Collection~~
34 ~~Board *University of California* may accept public and private funds~~
35 ~~for the purpose of implementing this article.~~

36 ~~(b) Any funds made available for purposes of this article,~~
37 ~~including fees collected pursuant to Section 103625, shall be~~
38 ~~deposited into the Umbilical Cord Blood Collection Program Fund,~~
39 ~~which is hereby created in the State Treasury. Moneys in the fund~~

1 shall be available, upon appropriation by the Legislature, for
2 purposes of this article.

3 (c) The fund ~~shall include any~~ *may include additional* federal,
4 state, and private funds made available for purposes of the program,
5 including, but not limited to, the fees collected for the fund
6 pursuant to Section 103625, and, notwithstanding Section 16305.7
7 of the Government Code, any interest earned on moneys in the
8 fund.

9 (d) *Nothing in this section shall preclude the University of*
10 *California from establishing and administering an additional fund*
11 *independent of the State Treasury in support of the program or*
12 *associated clinical research activities.*

13 ~~(d)~~

14 (e) No moneys shall be expended from the ~~fund~~ *Umbilical Cord*
15 *Blood Collection Program Fund* to implement the program unless
16 and until *the University of California accepts the request and*
17 *develops the plan described in paragraph (1) of subdivision (a) of*
18 *Section 1627, and the Controller determines, by not later than*
19 *____, that at least ____ dollars (\$____), including both federal and*
20 *private moneys, is available in the fund.*

21 ~~(e)~~

22 (f) The Controller shall determine whether there is at least ____
23 dollars (\$____) available for implementation of the program. Once
24 the Controller has determined that at least ____ dollars (\$____) is
25 available to implement the program, he or she shall distribute these
26 funds. If the Controller has not made a determination on or before
27 ____, that at least ____ dollars (\$____) is available to implement
28 the program, the amount in the fund shall be immediately
29 distributed to each private contributor or the federal government
30 in the amount contributed, and the amount of funds attributable to
31 ~~the two dollar (\$2) fee collected pursuant to Section 103625 shall~~
32 ~~be deposited into the Children's Trust Fund. The contributed. The~~
33 fund shall cease to exist thereafter.

34 ~~SEC. 6.~~

35 *SEC. 4.* Section 1630 of the Health and Safety Code is amended
36 to read:

37 1630. (a) This article shall remain in effect only until January
38 1, 2020, and as of that date is repealed, unless a later enacted
39 statute, that is enacted before January 1, 2020, deletes or extends
40 that date.

1 ***(b) This article shall be implemented only to the extent that***
2 ***adequate funding for its implementation, as determined by the***
3 ***University of California, is appropriated to the University of***
4 ***California in the annual Budget Act or another statute.***

5 ~~SEC. 7.~~

6 SEC. 5. Section 102247 of the Health and Safety Code is
7 amended to read:

8 102247. (a) There is hereby created in the State Treasury the
9 Health Statistics Special Fund. The fund shall consist of revenues,
10 including, but not limited to, all of the following:

11 (1) Fees or charges remitted to the State Registrar for record
12 search or issuance of certificates, permits, registrations, or other
13 documents pursuant to Chapter 3 (commencing with Section
14 26801) of Part 3 of Division 2 of Title 3 of the Government Code,
15 and Chapter 4 (commencing with Section 102525), Chapter 5
16 (commencing with Section 102625), Chapter 8 (commencing with
17 Section 103050), and Chapter 15 (commencing with Section
18 103600) of Part 1 of Division 102.

19 (2) Funds remitted to the State Registrar by the federal Social
20 Security Administration for participation in the enumeration at
21 birth program.

22 (3) Funds remitted to the State Registrar by the National Center
23 for Health Statistics pursuant to the federal Vital Statistics
24 Cooperative Program.

25 (4) Any other funds collected by the State Registrar, except
26 Children's Trust Fund fees collected pursuant to Section 18966 of
27 the Welfare and Institutions Code, Umbilical Cord Blood
28 Collection Program Fund fees collected pursuant to Section 1628,
29 fees allocated to the Judicial Council pursuant to Section 1852 of
30 the Family Code, and fees collected pursuant to Section 103645,
31 all of which shall be deposited into the General Fund.

32 (b) Moneys in the Health Statistics Special Fund shall be
33 expended by the State Registrar for the purpose of funding its
34 existing programs and programs that may become necessary to
35 carry out its mission, upon appropriation by the Legislature.

36 (c) Health Statistics Special Fund moneys shall be expended
37 only for the purposes set forth in this section and Section 102249,
38 and shall not be expended for any other purpose or for any other
39 state program.

(d) It is the intent of the Legislature that the Health Statistics Special Fund provide for the following:

(1) Registration and preservation of vital event records and dissemination of vital event information to the public.

(2) Data analysis of vital statistics for population projections, health trends and patterns, epidemiologic research, and development of information to support new health policies.

(3) Development of uniform health data systems that are integrated, accessible, and useful in the collection of information on health status.

(e) This section shall remain in effect only until January 1, 2020, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2020, deletes or extends that date.

~~SEC. 8.~~

SEC. 6. Section 102247 is added to the Health and Safety Code, to read:

102247. (a) There is hereby created in the State Treasury the Health Statistics Special Fund. The fund shall consist of revenues, including, but not limited to, all of the following:

(1) Fees or charges remitted to the State Registrar for record search or issuance of certificates, permits, registrations, or other documents pursuant to Chapter 3 (commencing with Section 26801) of Part 3 of Division 2 of Title 3 of the Government Code, and Chapter 4 (commencing with Section 102525), Chapter 5 (commencing with Section 102625), Chapter 8 (commencing with Section 103050), and Chapter 15 (commencing with Section 103600) of Part 1 of Division 102.

(2) Funds remitted to the State Registrar by the federal Social Security Administration for participation in the enumeration at birth program.

(3) Funds remitted to the State Registrar by the National Center for Health Statistics pursuant to the federal Vital Statistics Cooperative Program.

(4) Any other funds collected by the State Registrar, except Children's Trust Fund fees collected pursuant to Section 18966 of the Welfare and Institutions Code, fees allocated to the Judicial Council pursuant to Section 1852 of the Family Code, and fees collected pursuant to Section 103645, all of which shall be deposited into the General Fund.

1 (b) Moneys in the Health Statistics Special Fund shall be
2 expended by the State Registrar for the purpose of funding its
3 existing programs and programs that may become necessary to
4 carry out its mission, upon appropriation by the Legislature.

5 (c) Health Statistics Special Fund moneys shall be expended
6 only for the purposes set forth in this section and Section 102249,
7 and shall not be expended for any other purpose or for any other
8 state program.

9 (d) It is the intent of the Legislature that the Health Statistics
10 Special Fund provide for the following:

11 (1) Registration and preservation of vital event records and
12 dissemination of vital event information to the public.

13 (2) Data analysis of vital statistics for population projections,
14 health trends and patterns, epidemiologic research, and
15 development of information to support new health policies.

16 (3) Development of uniform health data systems that are
17 integrated, accessible, and useful in the collection of information
18 on health status.

19 (e) This section shall become operative on January 1, 2020.

20 ~~SEC. 9:~~

21 *SEC. 7.* Section 103605 of the Health and Safety Code is
22 amended to read:

23 103605. (a) The money collected by the State Registrar shall
24 be deposited with the Treasurer for credit to the Health Statistics
25 Special Fund, except for the Children's Trust Fund fees collected
26 pursuant to Section 18966 of the Welfare and Institutions Code,
27 the Umbilical Cord Blood Collection Program Fund fees collected
28 pursuant to Section 1628, the fees allocated to the Judicial Council
29 pursuant to Section 1852 of the Family Code, and the fees collected
30 pursuant to Section 103645, all of which shall be deposited in the
31 General Fund.

32 (b) This section shall remain in effect only until January 1, 2020,
33 and as of that date is repealed, unless a later enacted statute, that
34 is enacted before January 1, 2020, deletes or extends that date.

35 ~~SEC. 10:~~

36 *SEC. 8.* Section 103605 is added to the Health and Safety Code,
37 to read:

38 103605. (a) The money collected by the State Registrar shall
39 be deposited with the Treasurer for credit to the Health Statistics
40 Special Fund, except for the Children's Trust Fund fees collected

1 pursuant to Section 18966 of the Welfare and Institutions Code,
2 the fees allocated to the Judicial Council pursuant to Section 1852
3 of the Family Code, and the fees collected pursuant to Section
4 103645, all of which shall be deposited in the General Fund.

5 (b) This section shall become operative on January 1, 2020.

6 ~~SEC. 11.~~

7 *SEC. 9.* Section 103625 of the Health and Safety Code is
8 amended to read:

9 103625. (a) A fee of three dollars (\$3) shall be paid by the
10 applicant for a certified copy of a fetal death or death record.

11 (b) (1) A fee of three dollars (\$3) shall be paid by a public
12 agency or licensed private adoption agency applicant for a certified
13 copy of a birth certificate that the agency is required to obtain in
14 the ordinary course of business. A fee of nine dollars (\$9) shall be
15 paid by any other applicant for a certified copy of a birth certificate.
16 Four dollars (\$4) of any nine-dollar (\$9) fee is exempt from
17 subdivision (e) and shall be paid either to a county children's trust
18 fund or to the State Children's Trust Fund, in conformity with
19 Article 5 (commencing with Section 18965) of Chapter 11 of Part
20 6 of Division 9 of the Welfare and Institutions Code. Two dollars
21 (\$2) of any nine-dollar (\$9) fee is exempt from subdivision (e) and
22 shall be paid to the Umbilical Cord Blood Collection Program
23 Fund in conformity with Section 1628.

24 (2) The board of supervisors of any county that has established
25 a county children's trust fund may increase the fee for a certified
26 copy of a birth certificate by up to three dollars (\$3) for deposit in
27 the county children's trust fund in conformity with Article 5
28 (commencing with Section 18965) of Chapter 11 of Part 6 of
29 Division 9 of the Welfare and Institutions Code.

30 (c) A fee of three dollars (\$3) shall be paid by a public agency
31 applicant for a certified copy of a marriage record, that has been
32 filed with the county recorder or county clerk, that the agency is
33 required to obtain in the ordinary course of business. A fee of six
34 dollars (\$6) shall be paid by any other applicant for a certified
35 copy of a marriage record that has been filed with the county
36 recorder or county clerk. Three dollars (\$3) of any six-dollar (\$6)
37 fee is exempt from subdivision (e) and shall be transmitted monthly
38 by each local registrar, county recorder, and county clerk to the
39 state for deposit into the General Fund as provided by Section
40 1852 of the Family Code.

1 (d) A fee of three dollars (\$3) shall be paid by a public agency
2 applicant for a certified copy of a marriage dissolution record
3 obtained from the State Registrar that the agency is required to
4 obtain in the ordinary course of business. A fee of six dollars (\$6)
5 shall be paid by any other applicant for a certified copy of a
6 marriage dissolution record obtained from the State Registrar.

7 (e) Each local registrar, county recorder, or county clerk
8 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall
9 transmit 15 percent of the fee for each certified copy to the State
10 Registrar by the 10th day of the month following the month in
11 which the fee was received.

12 (f) In addition to the fees prescribed pursuant to subdivisions
13 (a) to (d), inclusive, all applicants for certified copies of the records
14 described in those subdivisions shall pay an additional fee of three
15 dollars (\$3), that shall be collected by the State Registrar, the local
16 registrar, county recorder, or county clerk, as the case may be.

17 (g) The local public official charged with the collection of the
18 additional fee established pursuant to subdivision (f) may create
19 a local vital and health statistics trust fund. The fees collected by
20 local public officials pursuant to subdivision (f) shall be distributed
21 as follows:

22 (1) Forty-five percent of the fee collected pursuant to subdivision
23 (f) shall be transmitted to the State Registrar.

24 (2) The remainder of the fee collected pursuant to subdivision
25 (f) shall be deposited into the collecting agency's vital and health
26 statistics trust fund, except that in any jurisdiction in which a local
27 vital and health statistics trust fund has not been established, the
28 entire amount of the fee collected pursuant to subdivision (f) shall
29 be transmitted to the State Registrar.

30 (3) Moneys transmitted to the State Registrar pursuant to this
31 subdivision shall be deposited in accordance with Section 102247.

32 (h) Moneys in each local vital and health statistics trust fund
33 shall be available to the local official charged with the collection
34 of fees pursuant to subdivision (f) for the applicable jurisdiction
35 for the purpose of defraying the administrative costs of collecting
36 and reporting with respect to those fees and for other costs as
37 follows:

38 (1) Modernization of vital record operations, including
39 improvement, automation, and technical support of vital record
40 systems.

(2) Improvement in the collection and analysis of health-related birth and death certificate information, and other community health data collection and analysis, as appropriate.

(i) Funds collected pursuant to subdivision (f) shall not be used to supplant funding in existence on January 1, 2002, that is necessary for the daily operation of vital record systems. It is the intent of the Legislature that funds collected pursuant to subdivision (f) be used to enhance service to the public, to improve analytical capabilities of state and local health authorities in addressing the health needs of newborn children and maternal health problems, and to analyze the health status of the general population.

(j) Each county shall annually submit a report to the State Registrar by March 1 containing information on the amount of revenues collected pursuant to subdivision (f) in the previous calendar year and on how the revenues were expended and for what purpose.

(k) Each local registrar, county recorder, or county clerk collecting the fee pursuant to subdivision (f) shall transmit 45 percent of the fee for each certified copy to which subdivision (f) applies to the State Registrar by the 10th day of the month following the month in which the fee was received.

(l) The additional three dollars (\$3) authorized to be charged to applicants other than public agency applicants for certified copies of marriage records by subdivision (c) may be increased pursuant to Section 114.

(m) In providing for the expiration of the surcharge on birth certificate fees on June 30, 1999, the Legislature intends that juvenile dependency mediation programs pursue ancillary funding sources after that date.

(n) This section shall remain in effect only until January 1, 2020, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2020, deletes or extends that date.

~~SEC. 12.~~

SEC. 10. Section 103625 is added to the Health and Safety Code, to read:

103625. (a) A fee of three dollars (\$3) shall be paid by the applicant for a certified copy of a fetal death or death record.

(b) (1) A fee of three dollars (\$3) shall be paid by a public agency or licensed private adoption agency applicant for a certified copy of a birth certificate that the agency is required to obtain in

1 the ordinary course of business. A fee of seven dollars (\$7) shall
2 be paid by any other applicant for a certified copy of a birth
3 certificate. Four dollars (\$4) of any seven-dollar (\$7) fee is exempt
4 from subdivision (e) and shall be paid either to a county children's
5 trust fund or to the State Children's Trust Fund, in conformity with
6 Article 5 (commencing with Section 18965) of Chapter 11 of Part
7 6 of Division 9 of the Welfare and Institutions Code.

8 (2) The board of supervisors of any county that has established
9 a county children's trust fund may increase the fee for a certified
10 copy of a birth certificate by up to three dollars (\$3) for deposit in
11 the county children's trust fund in conformity with Article 5
12 (commencing with Section 18965) of Chapter 11 of Part 6 of
13 Division 9 of the Welfare and Institutions Code.

14 (c) A fee of three dollars (\$3) shall be paid by a public agency
15 applicant for a certified copy of a marriage record, that has been
16 filed with the county recorder or county clerk, that the agency is
17 required to obtain in the ordinary course of business. A fee of six
18 dollars (\$6) shall be paid by any other applicant for a certified
19 copy of a marriage record that has been filed with the county
20 recorder or county clerk. Three dollars (\$3) of any six-dollar (\$6)
21 fee is exempt from subdivision (e) and shall be transmitted monthly
22 by each local registrar, county recorder, and county clerk to the
23 state for deposit into the General Fund as provided by Section
24 1852 of the Family Code.

25 (d) A fee of three dollars (\$3) shall be paid by a public agency
26 applicant for a certified copy of a marriage dissolution record
27 obtained from the State Registrar that the agency is required to
28 obtain in the ordinary course of business. A fee of six dollars (\$6)
29 shall be paid by any other applicant for a certified copy of a
30 marriage dissolution record obtained from the State Registrar.

31 (e) Each local registrar, county recorder, or county clerk
32 collecting a fee pursuant to subdivisions (a) to (d), inclusive, shall
33 transmit 15 percent of the fee for each certified copy to the State
34 Registrar by the 10th day of the month following the month in
35 which the fee was received.

36 (f) In addition to the fees prescribed pursuant to subdivisions
37 (a) to (d), inclusive, all applicants for certified copies of the records
38 described in those subdivisions shall pay an additional fee of three
39 dollars (\$3), that shall be collected by the State Registrar, the local
40 registrar, county recorder, or county clerk, as the case may be.

(g) The local public official charged with the collection of the additional fee established pursuant to subdivision (f) may create a local vital and health statistics trust fund. The fees collected by local public officials pursuant to subdivision (f) shall be distributed as follows:

(1) Forty-five percent of the fee collected pursuant to subdivision (f) shall be transmitted to the State Registrar.

(2) The remainder of the fee collected pursuant to subdivision (f) shall be deposited into the collecting agency's vital and health statistics trust fund, except that in any jurisdiction in which a local vital and health statistics trust fund has not been established, the entire amount of the fee collected pursuant to subdivision (f) shall be transmitted to the State Registrar.

(3) Moneys transmitted to the State Registrar pursuant to this subdivision shall be deposited in accordance with Section 102247.

(h) Moneys in each local vital and health statistics trust fund shall be available to the local official charged with the collection of fees pursuant to subdivision (f) for the applicable jurisdiction for the purpose of defraying the administrative costs of collecting and reporting with respect to those fees and for other costs as follows:

(1) Modernization of vital record operations, including improvement, automation, and technical support of vital record systems.

(2) Improvement in the collection and analysis of health-related birth and death certificate information, and other community health data collection and analysis, as appropriate.

(i) Funds collected pursuant to subdivision (f) shall not be used to supplant funding in existence on January 1, 2002, that is necessary for the daily operation of vital record systems. It is the intent of the Legislature that funds collected pursuant to subdivision (f) be used to enhance service to the public, to improve analytical capabilities of state and local health authorities in addressing the health needs of newborn children and maternal health problems, and to analyze the health status of the general population.

(j) Each county shall annually submit a report to the State Registrar by March 1 containing information on the amount of revenues collected pursuant to subdivision (f) in the previous calendar year and on how the revenues were expended and for what purpose.

(k) Each local registrar, county recorder, or county clerk collecting the fee pursuant to subdivision (f) shall transmit 45 percent of the fee for each certified copy to which subdivision (f) applies to the State Registrar by the 10th day of the month following the month in which the fee was received.

(l) The additional three dollars (\$3) authorized to be charged to applicants other than public agency applicants for certified copies of marriage records by subdivision (c) may be increased pursuant to Section 114.

(m) In providing for the expiration of the surcharge on birth certificate fees on June 30, 1999, the Legislature intends that juvenile dependency mediation programs pursue ancillary funding sources after that date.

(n) This section shall become operative on January 1, 2020.

~~SEC. 13.~~

SEC. 11. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to fund efforts aimed at curing disorders and diseases at the earliest possible time, it is necessary that this act take effect immediately.

CORRECTIONS:

Heading—Line 7.

Text—Page 9.